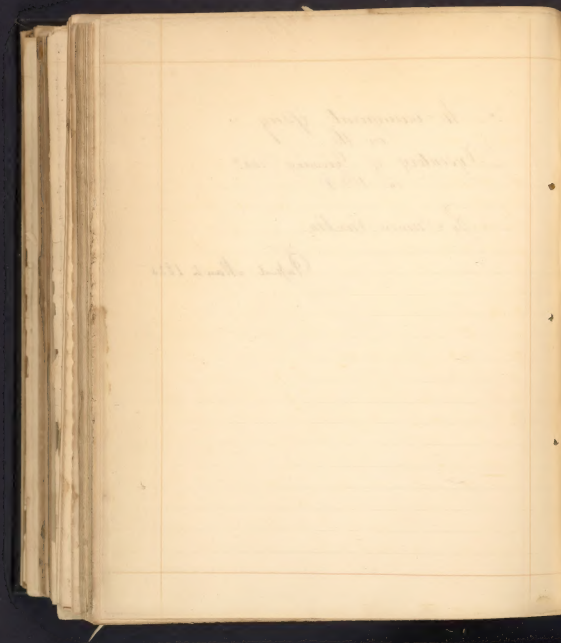


An inaugural essay
on the
Dysentery of Litching Conn.
in 1824.

By James Rankin

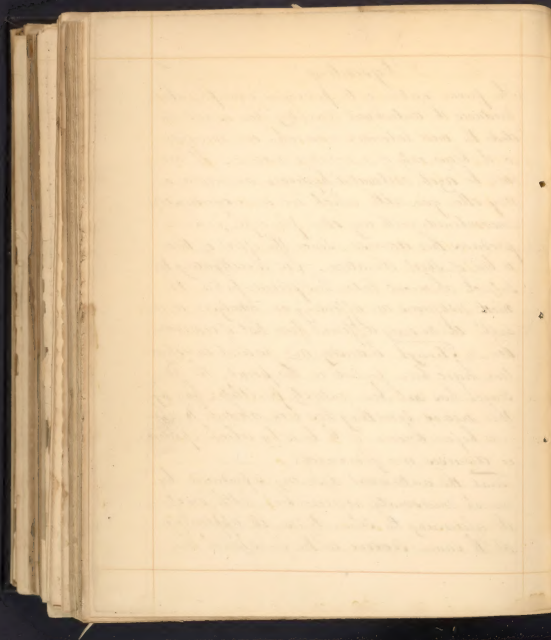
Printed March 1825



Dysentery

The precise nature of the poisonous principle which produces the autumnal dysentery, has as yet eluded the most laborious research; our knowledge of it being only of a negative nature. It cannot be azote, carbonated hydrogen, ammonia, or any other gas with which we are acquainted; uncombined with any other principle, which produces this disease, since the effect of these is but of short duration. In investigating this subject chemical labor has proved futile; the most fastidious air affording on analysis, a result in no way different from that of common air. Though industry and patient investigation have been foisted in this point, the research has not been entirely fruitless; for by this means something has been added to what was before known of the laws by which epidemic diseases are governed.

That the autumnal dysentery is produced by marsh miasmata requires but little proof; its assuming the same type, its appearing at the same seasons, as the fevers which are



well known to have this origin, and the frequent changes which take place from dysentery to fever and vice versa, are strong evidences of their being derived from the same source. It is also a strong evidence in favor of this conclusion, that the dysentery which is produced by putrid aliment, differs from the autumnal; the former always running a continued course whereas the latter is generally either remittent or intermittent.*

The number of advocates for the contagious nature of dysentery is yearly diminishing, the proofs which they can bring in support of their opinion appear to be insufficient to convince medical men who are much conversant with the disease, though supported by the authority of the ancients. It argues strongly in favor of the noncontagious nature of dysentery that it appears to proceed from the same source as the common bilious fever, which is almost universally acknowledged to be noncontagious. Notwithstanding what has been said, it may be that there is a typhus dysentery which is contagious.

* See Dr. Pott's note to Armstrong on typhus dysentery

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Before physicians should adopt the doctrine of the contagious nature of such a disease as this is, it should be founded on the most incontrovertible basis; else the sick might, without cause, be left to perish alone; the principle of self-preservation being so powerful, as to sever the bonds of consanguinity and friendship.

The doctrine of the contagious nature of this kind of many other diseases is daily finding ground; the light which emanates from our medical schools is rapidly dispelling the mists of prejudice from the mental horizon; and though we cannot expect to be entirely free from the clouds of error, we may confidently look for a still clearer light. The operation of miasmata appears to be modified by moisture and heat, and perhaps by other circumstances. "When the ground is thoroughly wet the effluvia are generally productive of gastric and intestinal disorder, when more moist, of intermittents and ordinary bilious fever."

The course of the diseases of Lycoming Co. is

* See Chapman on Epidemics

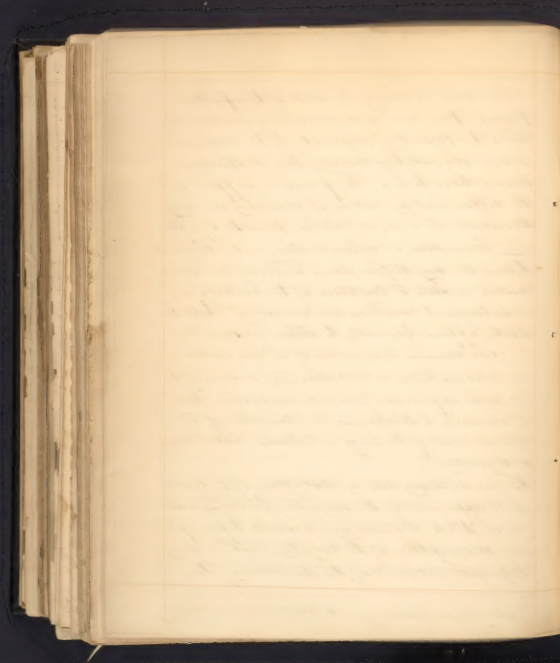
1824 went to verify the truth of this position, though there were accidental circumstances by which, the dysentery appeared to be rendered a more devastating malady than it otherwise would have been. The proofs in support of the inflammatory nature of dysentery are very decided; it is well known that the symptoms and termination of inflammation in the different tissues are very dissimilar. To constitute inflammation a state of congestion of the blood vessels & a subsequent reaction are necessary,* both these states appear generally to obtain in dysentery.

The common termination of inflammation of the mucous tissue is idiosyncrasy and according to the most experienced morbid anatomists, there is generally a thickening or ulceration of the yellow coat of the large intestines in fatal cases of dysentery.[†]

Before entering into a description of the dysentery as it appeared in the neighbourhood of Zennaro in 1824 I shall give a short topographical description of the country, with a very imperfect account of the diseases of the

* Chapman's Lectures

† Baillie's morbid anatomy



preceding winter and spring in that neighbourhood.

Thornboro is a small village, situated on the east side of the west branch of the Susquehanna, about twenty six miles above its junction with the north branch. About 20 or 25 square miles on the east side of the river is nearly level, and is but little elevated above the level of the river. In this tract of land, by the stones which are near the surface of the ground, do not generally appear ranged in strata, most of them are rounded and of the same kind as those in the beds of rivers. This circumstance together with their being no outlet through the surrounding hills, towards the south or ^{east} lower country, gives great probability to the opinion that this portion of country once formed the bed of a lake.

The lower portion of country is bounded by the Muncy hills on the south, & further removed from the river is elevated as a terrace. In the summer of 1823 the Deputy Surveyor was directed to the hills to the westward of Thornboro when the Lancaster county was subject to



adverse bilious later intermixed with dysentery.

The winter of 1823. 24 was an unusually mild the ground being bare nearly all the season after the first of January. Very frequent showers of rain fell during the latter part of winter and in the beginning of spring, which together with the very frequent alternation of freezing and thawing made the weather very unpleasant for several months. The duration of the close of winter and the commencement of spring bore the highest character. Early in the spring the mists made their appearance, progressing gradually through the country until the first of August when they began to abate. This season then assumed a more than usually malignant character; in the commencement of the season generally attacking the lungs and when the season was further advanced, falling more frequently on the bowels. From the middle of May to the middle of August light warm showers of rain were almost daily brought up by south western winds, keeping the ground thoroughly wet and producing



a very luxuriant vegetation, though the fall
crops had a very unfavorable appearance early
in the spring - From the middle of Aug. up to
the middle of October the rains were not
so frequent as in the preceding part of the sea-
son though they were sufficiently so to keep
the ground moist - During this part of the
season the wind was most commonly from
the north west - About the first of Nov.
the dysentery commenced & continued
to rage violently until the middle of Nov.
quite, from which time it began to decline
and on the first of Dec. there was
scarcely a case of the disease in the sur-
rounding neighborhood - At the same time that the dysen-
tery prevailed, severe cases of cholera morbus
were common - After the first of September
the country was generally healthy, the most
prevalent diseases being ordinary fevers
severe and intermittent, and this instance
the present winter - Diseases of rain are
frequent to produce the result which has
been ascribed to them - and the disease



as of the season followed, in course which
according to tradition they were all preserved.

It is not improbable that the course of the
winds had some influence in rendering the
country unhealthy. For as long as the wind
continued frequently to blow from the South
west, the dysentery raged violently, but when
the wind changed and blew for some time
from the North west, the country became
healthy - A respectable practitioner of
"Saville Town" informed me that, during
the summer of 1823, whenever the wind
was from the South west the number of those
who were daily taken down with the fever
was much augmented - "During a week"
said he "in which the wind was from the
North west those that were sick began to
recover and there were but few new cases
but suddenly the wind changed and blew
from the South west and in two days
there were no less than forty new cases
in the town & township adjoining -
(The measles appeared not to produce a



weakness of the bowels and to dispose the system more easily to be operated on by the miasmatic. Of the first fifteen or twenty cases of dysentery which occurred, there was scarcely one patient that had not had the measles in the Spring.

In many instances, during the summer, the measles came out on the skin, a day or two after an attack of the dysentery. The latter disease followed, nearly, the same course, through the country that the measles had gone before. We are well aware that measles very frequently produce a disordered action of the bowels, it is therefore very probable that they might render them more susceptible of the action of miasmata. The change of diet from salted to fresh meat is recorded, as having been the sole cause of dysentery* and even one knows instances of its producing diarrhoea. In our part of the colony this change commonly takes place about the time that the dysentery commences. May not this have been another important cause of the dysentery? The first cases of dysentery were of a milder character.

* See Dr. Cullen's Ed. to Anomalous or Dysentery



than those which followed, which perhaps
may be accounted for by supposing that the
micromata had not as yet attained their ut-
most virulence; but were sufficiently pow-
erful to produce the dysentery in those whose
bowels had been weakened by the ^{measles} ~~fever~~.

About the first of June the dysen-
tery commenced in a family, the junior part of
which had had the measles about three weeks
before. Their symptoms were a chilliness
which lasted during the first four or five
days, though the skin except of the extremi-
ties was rather above the natural heat;
loss of appetite, the tongue covered with an in-
crestation which was slightly tinged with
yellow; the pulse quick small and sharded;
the pain of the bowels not so severe as is com-
mon in dysentery; the alvine discharges were
mucous slightly tinged with blood, no sym-
ptoms were passed unless from the operation
of some cathartic medicine; obstinate consti-
pation and some irritability of stomach until
depletion and a pericent medicine had been



once successfully used. In accordance
with the instructions of distinguished medical
authority, I bleed once or twice copiously from
the arm, and if this did not ameliorate the
symptoms, it evidently paved the way for
the use of other medicines, rendering the
operation of cathartics much more quick
(and) powerful than if it had been omitted.

In these cases after bleeding, an emetic
was administered to remove some obstructions
which existed at the pit of the stomach. &
this together with the cathartic which was
subsequently given much alleviated the ir-
-regularity of that organ. To calm the bow-
-els I used calomel sometimes with opium &
followed by small doses of sulphate of
magnesia repeated until purging was indu-
-ced to be the most effectual means which
I attempted to use. After the bowels were
once cleared, castor oil or Epsom salts could
be retained on the stomach (and) answered the
purpose of evacuation very well. A dose
of one of these was given on every alternate



day, (And in the interval pills of Calomel
opium & Ipecacuanha were given as re-
commended by Dr. Chapman; these pills
produced a more natural appearance to
the stools, and an almost entire relief from
the pain. Astringents were evidently hurt-
ful as long as any degree of febrile action
remained. In the latter stage of several
cases which occurred in the month of June
when the appetite was beginning to return,
a slight degree of fever still remaining
with some tenesmus, (And the stools generally
slimy, I administered infusion of Catueta
& cinnamon with tinct. of opium, but
with the effect of increasing the fever and
tenesmus. From this time astringents were
laid aside except in cases of diarrhoea
following dysentery; the flannel bandage
applied round the abdomen appeared to
be a much more benefited remedy even in
cases of diarrhoea subsequent to dysentery,
(And when there was some fever and ten-
esmus with mucous stools recourse was



had to a mixture of tartar emetic and epsom salts, in sufficient quantity to produce daily by two or three natural (biliary) evacuations.

About a month after the commencement of the dysentery it became more violent than it had previously been (and assumed symptoms in some respects different from those which had an opportunity of observing in preceding years. Many cases commenced with vomiting which approached nearly to cholera morbus; this was generally succeeded in five or six hours by retching and irritability of stomach nothing being thrown up except the ingesta.

These cases could ~~generally~~^{usually} be distinguished from cholera, by the appearance and sensativeness of the stools, by the pain in the bowels and tenismus. (The pulse had not the same degree of tension and was not so quick as is usual in common cases of dysentery. The stools presented various appearances being sometimes of a dark greenish colour, and the blood which was mixed with them - was generally of a dark colour; they ap-



proved to be a mixture of blood, mucus and
deranged bilious secretions. This a clear
and firm Stool generally continued du-
ring the first week of the disease, or until
the liver was emolged by appropriate
medicines. Altho. this was accomplished
the Stools became more scanty and of a light
or colour than before, but were still tinged
with blood. Though there are few diseases
that reduce the system more rapidly than
the common form of dysentery, this form of
the disease was still more rapid in its pro-
gress. During the three months of the continuance
of this disease, about eighty fore victims
to it, in the small village of Pennsboro; and
the surrounding country to the extent of four
miles square. This disease seemed similar
to a species of dysentery which is said by
Dr. Clarke to have occurred in India &
the treatment recommended by him was
adopted, viz. in the first place to allay
the irritability of the stomach by the same
means as are used in cholera. Other



called early, I attempted to cleanse the Stomach by pouring in plentifully of a weak infusion of chamomile. When the Stomach was cleansed, the various means commonly used for allaying the irritability of the Stomach, were resorted to, viz. an opiate by the mouth or (if not retained) as an injection, anodyne fomentations to the stomach and if these were ineffectual a blister to the epigastric region. Sometimes when other means had proved ineffectual to allay the irritability of the stomach, a small quantity of rice water with a few drops of laudanum, administered every hour, was successful. Though in some cases all the means resorted to were totally useless, and though in most cases there remained some degree of irritability of stomach, through the whole course of the disease, yet in the greater number of cases by the adoption of this course of treatment, the stomach could be so much quieted as to retain some kinds of med-



-icine - By high medical authority
the liver is said to frequently be engorged
in dysentery; supported by the opinion I
believed from the appearance of the stools
that this organ was implicated, in ma-
ny of the cases which I met with.

I commenced therefore purging with small
doses of calomel and small doses of opium
and followed by Epsom salts as men-
-tioned above; after its operation small doses
of calomel and opium were administered
two or three times a day, the calomel
being left out on account of the irrita-
-tion of the stomach. - I purge w. Epsom
salts which would generally be better on
the stomach than castor oil, was given on
alternate days. By this plan of treat-
-ment ptysalism was induced in several
cases and whenever this took place the
patient recovered. - In milder cases
as ptysalism was not desirable a
different course was pursued. Instead
of the mercury, small doses of tartar



emetic and Epsom Salt were given to keep the bowels open, and produce a dermatal eruption to the skin. A hypodermatic injection to the abdomen was frequently very of service in allaying the pain of the bowels, and in the middle stage of the disease a blister to the abdomen had the most desirable effect. But "blister" says Dr. Armstrong "in the latter stage of the disease produced too great an irritation on the weakened system. Warm bathing I prescribed with great advantage in the cases of children. Opium, if properly used is an invaluable remedy in the treatment of this complaint: large doses of opium may lull the pain for a time but the cause of the disease not being removed, by it, the symptoms return after its effect is over, with aggravated force.

During the course of the disease the antiphlogistic regimen should be strictly enforced; the diet should consist chiefly of farinaceous substances as sage, lupines &c.



But I found greater difficulty in regu-
lating the diet during convalescence than
during the violence of the disease, on account
of the craving appetite of the patient (and
the anxiety of the friends to give him rich
food in order to recruit his strength. A
child of four years of age who was under
my care was recovering slowly from dysen-
tery, her appetite had become good, though
the bowels were still in a disordered
state, her attendants gave her, ~~her~~, contrary
to directions, as much as she could eat
of salted fish, and in two hours after-
wards the fever had risen very high, with
delirium and an aggravation of the dysente-
ric symptoms. Not choosing to detract
blood on account her great debility, nor
to give her an emetic, because of the great
determination to the head. I therefore gave
her a dose of Epsom salt and put her
in the warm bath, with a repetition
of the purge on the following day. In
a few days she again became conval-

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went and finally recovered

